Minnesota Department of Education

CLiCS User ID / Password Request Form (add/delete)

For Access to the Cyber-Linked Interactive Child Nutrition System (CLiCS)

Complete this form to request or delete Child Nutrition System Program User IDs and Passwords for online access to CLiCS. User IDs must be requested for *each* person responsible for submitting information via CLiCS because it represents that individual's authorized signature to access the system. The Sponsor Organization is responsible for the security of passwords and is accountable for all data submitted. Each user will receive a confirmation e-mail including a login screen address, User ID and Password from "FNS Administrator."

Send the completed form with **required signatures** via scan to mde.fns@state.mn.us, fax to **(651)582-8501** or mail to: Minnesota Department of Education - Food and Nutrition Service, 1500 Hwy 36 West, Roseville, MN 55113.

Sponsor/Organization Information

Sponsor Name:	Sponsor ID Number:
Contact Person (Name and Title):	
Responsible Authority (Name and Title):	
Responsible Authority Signature (required):	

User Information—Select all that apply:

- ☐ Access is needed to manage Applications and Claims.
- ☐ Access is needed for Commodity Foods or Direct Certification for Schools (CLiCS 1).
- ☐ User is employed by a Food Service Management or Catering Company.
- ☐ Access is needed for Admin Budget and Claims for a Family Day Care Home Sponsor.
- ☐ This user should be DELETED from CLiCS (e-mail address and signature not required).

First Name:	Last Name:
E-mail Address (required):	Phone:
User Signature (required):	

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